Introduction

This article explores a hitherto overlooked aspect of lived, gendered poverty – that of ‘period poverty’. The notion of ‘menstrual poverty’ or ‘period poverty’ has most commonly been employed to describe the psychological wellbeing of menstruating girls in resource-poor countries across the Global South (Crichton et al, 2012). However, an inability to afford period products, widely known in the UK by the term ‘period poverty’, has been reported as a growing problem among girls and women from low-income backgrounds (Ryan, 2017; Trussell Trust, 2017; Tingle and Vora, 2018). The increasing discernibility of ‘period poverty’ in one of the richest nations in the Global North, follows a decade of unremitting and pervasive changes to the social security landscape that have had a disproportionately gendered impact in the UK (Reis, 2018).

A myriad of categories has latterly emerged in the UK to describe the multi-dimensional nature of poverty, including food poverty; fuel poverty and hygiene poverty (Crossley et al, 2019). While ‘period poverty’ can be understood as another category that intersects with other dimensions of poverty, it is important to focus...
on it as a distinct form of poverty because of its corporeal and gendered nature. In addition to the specific health risks resulting from inadequate menstrual health management such as bacterial infections (Hennegan, 2017), an inability to afford effective period protection causes menstruators to feel embarrassment, discomfort, indignity, humiliation and shame. Resultant self-exclusion from school, work and other social activities therefore has implications for women’s dignity and human rights (Williams, 2018). While academic research is thin on the ground in this area, a plethora of reports in the media have drawn attention to a link between ‘period poverty’ and austerity policies that have resulted in rising hardship (BBC News, 2017; Marsh, 2017; Rowlingson, 2017).

More recently, charities nationwide reported significant increased demand for period products during the coronavirus pandemic and subsequent lockdown, due to increasing numbers struggling financially (Moss, 2020). During this time, Plan International UK carried out a survey of 1,010 girls aged 14–21 and found that 30% had experienced difficulties affording or accessing sanitary wear and 54% had used toilet paper as an alternative (Plan International UK, 2020). In Stoke-On-Trent, a city in the West Midlands where this research was located, the charity Period Power, which works to alleviate ‘period poverty’, experienced a dramatic increase in April’s expenditure from £509 in 2019, to £3,684 in 2020.

While anecdotal evidence of ‘period poverty’ in Britain continues to grow, there remains a deficit of empirical research to provide insight into how it is lived with and experienced in everyday life. To address this lacuna, in 2018 in-depth interviews were conducted with several women in Stoke-On-Trent who had experiences of ‘period poverty’. The purpose was to determine the barriers in accessing period products, and to expound the ways in which daily lives were being affected. Additionally, in order to engender understanding of the consequential impact of ‘period poverty’ on girls’ participation in education, focus groups were conducted with staff as well as student members of the school council at a local academy. A third focus group was conducted with health professionals to ascertain the potential impact upon women’s health.

A feminist approach – centring lived, embodied experiences and providing a safe space for discussion – shaped the design of this research (Oakley, 1981; Skeggs, 2001) which offers empirical insights into the ways ‘period poverty’ is experienced. The perceived sensitivity of the subject matter along with persistent taboos surrounding menstruation (Laws, 1990; Lee, 1993; Kissling, 1996) presented specific challenges in conducting this research and recruiting participants. For instance, the existence of an etiquette governing how menstruation is spoken of and dealt with in western culture, not only determines how it is managed and experienced, it also impedes discussions of ‘period poverty’ (Laws, 1990). Consequently, this affected the number of participants I was able to recruit. While this could be viewed as a limitation of this study, it is important to remember that qualitative studies are, by their methodological nature notably small-scale, and rather than speaking to broader population trends, are better suited to advance understanding of in-depth, individual experiences (Gabb, 2009).

In what follows, I provide a synopsis of academic and policy literature on the current landscape of austerity in the UK, within which ‘period poverty’ is contextualised. I then move on to outline germane literature on the social meanings of menstruation to aid comprehension of how it is experienced and managed, and to provide awareness of how an absence of period products might affect the daily lives of women and girls. Erving Goffman’s concept of stigma (1963) is explicated to facilitate understanding
of the ways in which discriminatory practices and social attitudes are felt by women and girls who find themselves unable to afford sanitary wear. Following a description of the research design and methodology, key findings are discussed under the themes of *Keeping ‘It’ hidden; Disruption, concealment and curtailment; and Embarrassment, shame and stigma.* Together, findings provide evidence that in the context of ‘period poverty’, inequalities of gender and class are reinforced and reproduced, exemplifying stigma as a political and social function and a form of power.

**Austerity, gender inequality and period poverty in the UK**

The visibility of ‘period poverty’ in the UK is occurring concomitantly with increasing levels of poverty more generally. Post-2010 austerity policies have had particularly severe effects on families with children who have limited resources, as well as many young people (Walby, 2015; Murphy, 2016; McDowell, 2017; Perrons, 2017; Hall, 2018). In the absence of the UK government conducting gender impact assessments of austerity policies, the Women’s Budget Group initiated analyses in 2013 and 2014 (Reis, 2018) demonstrating that the consequences of protracted post-2010 vicissitudes to benefits, tax credits and taxation, have been unquestionably ‘gender unequal’ (Walby, 2015: 97). Further investigations have confirmed the gendered distributional consequences of austerity (Pearson and Elson, 2015; Murphy, 2016; MacDonald, 2017; Perrons, 2017; Hall, 2017), which has been described by Hall as ‘a distinctly gendered ideology, process and condition’ (2018: 242).

A more recent feminist analysis by the Women’s Budget Group and the Runnymede Trust has estimated that by 2020 the living standards of the most vulnerable and poorest women will have been adversely affected by cuts in welfare and benefit payments totalling £37 billion a year (Pearson, 2019). Furthermore, the release of new data from the Department of Work and Pensions (DWP) indicates that ‘120,297 single claimant women have had their benefits capped, compared with just 13,743 men, with the vast majority of these being mothers of dependent children’ (Pearson, 2019: 31). According to the Joseph Rowntree Foundation (Collingwood, 2018), some 5.2 million women were suffering poverty in the UK compared with 4.7 million men, with specific groups (black and minority ethnic women, disabled women and female lone parents) being more likely to be experiencing hardship. Scholars have suggested that in this new austere epoch, gender relations have been re-shaped, precipitating the emergence of a new gender contract (Rubery and Rafferty, 2014; McDowell, 2017). What is important here is that women are shouldering the burden of austerity policies and remain more likely to experience poverty than men.

The concept of ‘menstrual poverty’ was employed by Crichton et al (2012) to categorise the manifold gendered deprivations relating to menstruation in resource-poor settings in the Global South. This was one of the first studies to draw attention to the psychological implications of menstrual deprivations through the use of in-depth interviews and focus group discussions with adolescent girls in Kenya. In addition to revealing how menstrual poverty involved everyday practical, as well as psychosocial challenges affecting girls at home and at school, emotional impacts such as anxiety, fear of stigma, embarrassment and low mood were also identified as an important consequence.

An examination of the academic literature, however, reveals a paucity of experiential evidence of ‘period poverty’ in the UK context – and the Global North more
generally—with charities and the media providing most contemporaneous resources from which to report. For instance, in 2017 the Trussell Trust reported that many households were increasingly turning to foodbanks for non-food essentials, calling on the government to take urgent action on low incomes. Research by the global menstrual health charity Plan International, highlighted that 10% of girls aged 14–21 in the UK were unable to afford period products and 12% had employed improvisation practices due to affordability issues (Tingle and Vora, 2018). It is worth noting that menstrual products in the UK are classed as luxury, non-essential items that are subject to 5% tax. A pack of 20, good quality sanitary towels or tampons can cost between £2 and £3 (Bloody Good Period, 2020), but since the number of pads or tampons required per month inevitably varies dependent on menstrual flow, it is difficult to estimate an average monthly cost. What is clear however, is that in the UK’s current economic climate having a period is a monthly expense that growing numbers are struggling to afford (Rowlingson, 2017).

In her ethnographic study of a Trussell Trust foodbank in Stockton-on-Tees, Kayleigh Garthwaite (2016) described meeting women who were struggling to afford period products. Findings from this study highlighted the embarrassment and shame that mark everyday realities for people accessing foodbanks and expanded upon how stigma is created and reproduced by influential public discourses (Garthwaite, 2016). In the context of food poverty, stigma can prevent people accessing foodbanks. For the women whom Garthwaite met in the foodbank, potent feelings of embarrassment compounded prevailing menstrual taboos to deter them from requesting sanitary wear.

Plan International’s study (Tingle and Vora, 2018) has similarly demonstrated that in the UK the shame associated with poverty combines with prevailing taboos surrounding periods to have negative impacts on girls’ and women’s lives. The ways in which poverty shapes and constrains social participation and social relationships for children and young people, causing unhappiness and anxiety, has been expansively documented by Ridge (2006; 2011). An awareness of the family’s financial circumstances can lead to the careful management of young people’s needs and expectations, resulting in self-denial and self-exclusion from social activities and school trips that require a financial cost (Ridge, 2006; Naven et al, 2019). Such evidence is key when considering the ways in which teenage girls manage their menstruation needs when family finances are strained. In terms of ‘period poverty’, age is a factor because of reports from schools of recurring patterns of absenteeism among pubescent girls from low-income households, creating cause for concern (BBC, 2017; Tingle and Vora, 2018). In not having adequate protection, the anxiety of being ‘outed’ as menstruating alongside accompanying feelings of embarrassment and shame would appear to be contributing to girls’ absenteeism.

In western culture, women are expected to hide their periods from public view (Martin, 1989; Laws, 1990). This message is continuously reinforced through advertisements for ‘feminine hygiene’ products, that promote and maintain a culture of secrecy in their emphasis on women being fresh and clean, contributing to anxiety about ‘shameful leaks’ (Chrisler, 2011: 203). In 2018, the Department for Education examined absence data to ascertain whether disadvantaged girls were missing school due to ‘period poverty’ (Department for Education, 2018). Findings illustrated an increased absence rate due to ‘illnesses’ for all girls aged 13 upwards, but with higher levels of absence for those eligible for free school meals. For pupils aged 10 upwards and eligible for free school meals, there was a steep increase in unauthorised absence...
due to ‘other reasons’. This report however, fails to tell us much about ‘period poverty’ or the effect on girls’ education and was criticised by campaigners for being too superficial, as such statistics merely demonstrate rates of absence while ignoring the reasons for non-attendance (Bowen-Viner, 2018). In the context of ‘period poverty’, families or girls struggling financially may be deterred from citing the real reason for absence, due to stigma. I elucidate this concept further in the next section.

A number of local grassroots initiatives have begun to proliferate across the UK in response to ‘period poverty’, raising awareness and money to provide period products to schools, colleges, women’s refuges and foodbanks (BBC News, 2017; Marsh, 2017). In January 2020, following calls for period products to be made freely available to students who need them, the UK Conservative government introduced a scheme to enable schools and colleges in England to access funding for sanitary products (Department for Education, 2020). However, despite claims that this scheme tackles period poverty, there are some issues of concern. For instance, the government allocates each school a set amount of money to spend on products calculated on the basis that 35% of pupils who menstruate will use them. For some schools this is an inadequate sum due to the socio-economic demography of the catchment area they serve. Furthermore, schools and colleges are required to ‘opt-in’ to this scheme, giving rise to concern from campaigners that pupils could be disadvantaged if their institution chooses not to participate. Further, and as I now go on to explore, there are important social meanings attached to menstruation in western culture, which offer necessary insight into the ways a lack of period products marks the lives of women and girls.

**Women's bodies, menstruation and stigma**

The interplay of power within language, beliefs and assumptions in relation to women and their bodies shape dominant discourses in society that function to assist in the reproduction of repressive gender social relations (Smart, 1992; Hassard et al, 2000). Women are subsequently gendered through a process of becoming feminine which, Skeggs reasons, transpires: ‘in the spaces of textually mediated discourse, in the dialectic between the active creating subject and the organisation of her activity in and by texts, produced in the interests of a wider global market’ (2001: 297).

Skeggs’ contention points to the ways in which women’s activity has been shaped historically in the cultural context of capitalism. Cultural discourses of the body thus structure thinking and behaviour, leading to self-regulation and disciplinary practices of femininity. These discourses then serve to mould girls’ bodies in a framework of prevailing systems of power (Lee and Sasser Coen, 1996). Menstruation has been recurrently defined biologically, medically, culturally and pathologically (Martin, 1989; Kissling, 1996), entwining women in social practices that sustain relations of domination. In a society divided by gender, Sophie Laws (1990) argues that theories relating to social meanings of menstruation are by nature political, with the hierarchy between the sexes regulating how menstruation should be dealt with and spoken of.

An ‘etiquette of menstruation’ (Laws, 1990: 29) thus exists that polices the ways in which women and girls manage this aspect of their biology in the social world, relating specifically to how a variety of methods of concealment may be accomplished. Enforced through social sanctions such as adverse comments, mockery and exclusion, etiquette expresses and underpins status distinctions, with women being discredited by any behaviour which draws attention to their period (Bobel, 2010). Explorations
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of menstrual management among schoolgirls in resource poor countries in the Global South have conveyed feelings of fear, shame and stigma due to cultural perceptions that the onset of menarche signals the advent of a girl’s sexual status (McMahon et al., 2011). In other words, menstruation is suffused with cultural meanings and is generally regarded as something which must be kept hidden.

A germane example of how menstruation is experienced by women in the Global North, can be found in Hawkey et al.’s (2016) study of migrant and refugee women in Australia and Canada. Findings illustrate how prevailing cultural discourses that portray menstruation as a crisis of hygiene to be managed, imbue periods with embarrassment. Central to these women’s accounts were descriptions of being immersed in cultural discourses of shame that provoked a change in attitude towards their bodies. Practices of self-surveillance and proprieties of concealment such as wearing dark coloured clothing to camouflage blood stains were ‘energy consuming’ (Hawkey et al., 2016: 14) and ubiquitous in women’s narratives. These are important observations when considering ‘period poverty’ and the ways in which the lives of women and girls might be compromised.

Patterson and Hale’s investigation into how women integrate menstrual care practices into their daily activities elucidated how menstruation is experienced as an ‘all-encompassing social, emotional, and biological event’ (1985: 20) necessitating constant management. In order to permit a continuation of normal daily life, women engage in a process of ‘making sure’ to safeguard the effectiveness of their menstrual maintenance. Comprising three components, attending, calculating and juggling, this process diminishes the worry that ‘social disclosure might occur’ (1985: 25). By assessing their daily menstrual flow women can judge when and how often to change pads or tampons and subsequently calculate the appropriate quantity of sanitary products required to get them through the day. This self-care performance involves juggling, which requires a congruence of time, space and supplies to be successfully accomplished. Accidents occur when mis-calculations are made, when there is a change in the pattern of menstrual flow, and when ‘situational constraints’ hinder the ‘making sure’ process (Patterson and Hale, 1985: 26). In the event of a mis-calculation women engaged in ‘makeshifting’ (1985: 27) which involved making do with whatever is available: toilet paper, tissues or paper towels. In light of reports of women and girls in the UK using such materials, this study is significant, since a lack of funds to buy period products could arguably constitute a ‘situational constraint’ necessitating ‘makeshifting’ practices.1

In considering and understanding women’s and girls’ fears of social disclosure relating to inadequate period protection, Erving Goffman’s key concepts of self-presentation and stigma (1963) are helpful for shedding light on how we create a particular impression in our everyday social encounters. Our social identities can be diminished or spoiled by a trait or mark that reduces our standing in society, described by Goffman (1963) as a stigma, a concept that has been influential across the social sciences to facilitate an understanding of discriminatory practices and social attitudes.

In a recent paper, Tyler and Slater (2018) note that Goffman made four claims about stigma: first, that it is socially constructed; second, that people learn to employ strategies of passing and concealment to cope with the harmful effects of being socially stigmatised; third, the forms which stigmatisation take are historically explicit; and last, that it acts ‘as a means of formal social control’ (Goffman, 1963: 139 in Tyler and Slater, 2018: 729). It is this final claim that Tyler and Slater contend is too often

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overlooked and it would seem particularly germane when considering the issue of ‘period poverty’ in its historical context of austerity policies that have significantly disadvantaged women. In focusing attention solely on micro-level social interactions, sociologists can risk ignoring social structures of power such as class and gender – both of which are pertinent to ‘period poverty’ – that shape the development of stigma in everyday contexts. There is a need therefore, to recognise that stigma and stigmatisation materialise in specific contexts of culture and power (Tyler and Slater, 2018).

Having demonstrated the current scarcity of empirical research into the ways in which ‘period poverty’ is being experienced by women and girls in the UK, the following section details how my research study was designed to enable detailed accounts of this issue to be shared by those most affected.

Research methodology

This study aimed to explore the nature of ‘period poverty’ as it is experienced by women and girls in Stoke-on-Trent, a city in the West Midlands with significant areas of deprivation (Hardship Commission, 2015). Stoke is the fourteenth most deprived local authority in England (out of 326) where 136,221 of its 255,378 people live in the top 20% most deprived areas and where 20.8% of people are experiencing deprivation due to low incomes, compared with an average of 14.6% in England (Stoke-on-Trent Joint Strategic Needs Assessment, 2019). In 2016 there were 22% (11,260) children under 15 living in out-of-work, benefit households, compared with a national average in England of 14% (JSNA, 2019). Specifically, this study aimed to explore: a) the barriers facing women and girls in accessing period products; b) the ways in which ‘period poverty’ affects the daily lives of women and girls, and c) to gain understanding of the ways in which ‘period poverty’ impacts girls’ education.

As the purpose of this study was to build up a rich, in-depth exploration and understanding of the phenomenon of ‘period poverty’ and how it is experienced by women and girls, a feminist approach underpinned the research design. Dorothy Smith argues that inquiry begins ‘in actual experience as embedded in the particular historical forms of social relations that determine that experience’ (1987: 49). Thus, taking the standpoint of women and commencing in female experiences enables access to ‘a knowledge of what is tacit’ (Skeggs, 2001: 13) thereby creating the possibility to apprehend and transform the gender incongruities in a patriarchal society.

A qualitative research methodology was chosen because at its core, is an interpretive epistemology that is concerned with participants’ accounts and perspectives of their social world (Mason and Dale, 2011; Ritchie et al, 2014). Recruiting participants proved challenging following the withdrawal from the study of a sixth-form college where ‘period poverty’ had been identified as a problem for some students. Although staff were initially supportive of the research and were confident that both staff and students would want to participate, they withdrew their involvement just as ethical approval was granted, alluding to the topic’s sensitivity as the reason. From a sociological perspective, sensitivity can be viewed as situated and created within the framework of cultural norms and taboos and can work together with stigma to impede efforts to generate empirical data (Barbour and Kitzinger, 1999).

In order to engender insight and understanding of the nature of ‘period poverty’ and of the ways in which it affects the lives of women, three in-depth interviews were conducted with women from low-income households for whom the cost of
menstruation had always been an issue. Selection criteria for the interviews specified that participants should be aged 16 and over, and have experience of struggling to afford period products, whether that be currently or retrospectively. Two of the interviewees were local university students, one a mature student and mother of three, the other a younger woman in her early twenties. Both students were working in part-time jobs to support themselves through their studies. A third interviewee was a mother of five, employed part-time in a local supermarket and caring full-time for her mum. Both mothers spoke about the challenges of stretching the household budget to provide for their children and of always putting their needs first. This often meant sacrificing their personal needs in order to pay rent, bills and to put food on the table (Dowler and Lambie-Mumford, 2015). All interviewees had shared experiences of regularly borrowing money from family members and friends to buy period products.

To generate knowledge of the consequential impact of ‘period poverty’ on girls’ education resulting from regular absenteeism, two focus groups were conducted at an 11–16-year-old sponsor-led academy, one with teaching/pastoral staff and another with five 16-year-old student representatives from the school council who had recently organised an assembly about ‘period poverty’. The academy staff focus group comprised the Vice Principal, two teachers and three non-teaching members of staff. A further focus group was conducted with six Community Public Health Nurses accessing schools and colleges across Stoke-on-Trent to elicit professional perspectives of the practical, emotional and psycho-social effects of ‘period poverty’ on women’s and girls’ health. The data from the focus groups with teaching and health professionals augmented the interview data through enhancing understanding of the negative impact ‘period poverty’ has on the lives of women and girls. For example, in curtailing daily activities such as attending school or lectures, as well as constraining social participation. Consent was freely given by all participants once they had read through and understood participant information sheets for both interviews and focus groups.

As suggested by Walkerdine (1984 in Skeggs, 2001: 17) the power of the researcher to examine and actualise their research ‘subject’ engages the researcher in a process analogous to that of the male gaze. In order to mitigate this, and following a feminist approach, care was taken in designing interviews and in framing questions sensitively with the aim of minimising uneven power relations inherent within interviewer/interviewee relationships. For example, as a female with a shared knowledge of menstruation, I was able to reciprocate with my own experiences which helped to establish some common ground and enabled candid conversations (Oakley, 1981). Participants were initially invited to share their experiences of menstruation before being asked to share their experiences of struggling to afford sanitary products and how this had affected their lives.

Data from the focus groups and interviews were recorded and transcribed in their entirety shortly after taking place. In the context of focus groups, the role and impact of the moderator as a gendered, embodied being can influence the data obtained as well as its subsequent analysis (Smithson, 2008). Mindful of my privileged position as a middle-class academic researcher with no experience of struggling to afford period products, and in keeping with a feminist research ethic (Skeggs, 2001), sensitivity and reflexivity were exercised when interpreting the data (Rose, 1997). Therefore, the decision was taken to present the data in participants’ own words. In the initial stages of data analysis, transcripts were read in their entirety and descriptive summaries
written, from which themes pertaining to the research questions were noted. Initial
coding was descriptive and open-ended, after which analytic codes were applied to
the texts to facilitate interpretation and subsequent critical discussion of the research
findings which are discussed below (Ryan and Bernard, 2003).

**New insights into the gendered inequalities of ‘period poverty’**

The findings presented below demonstrate the embodiment of dominant cultural
discourses that depict menstruation as a crisis of personal hygiene, and that ‘period
poverty’ is an issue for both women from lower socio-economic positions, and girls
from low-income households in Stoke-on-Trent who are in full-time education. These
insights are arranged into three key, albeit interwoven themes: *Keeping ‘It’ Hidden* to
elucidate how menstruation is managed and the lengths women go to in order to
maintain menstrual care practices when money is scarce, *Disruption, concealment and
curtailment* to explicate the ways in which ‘period poverty’ impacts everyday lives and
*Embarrassment, shame and stigma* to illustrate how experiences of ‘period poverty’ are felt.

**Keeping ‘it’ hidden**

Gender hierarchies regulate how menstruation is experienced and dealt with in many
cultures, in and through what has been termed an ‘etiquette of menstruation’ (Laws,
1990; Kissling, 1996). This signifies a complex set of rules regarding all things menstrual,
ranging from whom speaks of what to whom, through to the use of sanitary wear
and how they should be acquired, carried and disposed of. Such rules govern the
manner in which women and girls manage their periods in society and are intrinsically
linked with feelings of embarrassment and shame (Kissling, 1996). The quintessence
of this etiquette can be detected in this description of how menstruation feels and
the concomitant self-consciousness of wearing a sanitary pad in public:

‘It’s horrible, ’cos [pause] it’s something women go through all the time
but yet it’s not something that’s really talked about or [pause] it’s hidden,
it is hidden. It’s not like you can walk down the street and tell who’s
[menstruating], but I suppose as a woman you think they can – “oh I wonder
if they can see I’ve got a towel on?”’ (Kim, Interviewee)

Despite menstruation being a routine, biological event in the lives of many women
(Bobel, 2010), the etiquette of menstruation serves to keep periods hidden, policing
the ways in which this aspect of female biology is managed in the social world. As Laws
states, in relation to defining and preserving the social statuses of women and men
in modern societies, etiquette is important because in addition to reflecting ‘formal
and informal relations of authority’ (1990: 43) it also continues to support them.

The academy where part of this research was conducted, serves a particularly
disadvantaged area of Stoke-on-Trent and has approximately 1,011 pupils on roll,
most of whom are white British. In addition to having a significantly lower than
average proportion of pupils from minority ethnic groups, there is also an above
average proportion of students for whom the school receives the pupil premium
(Ofsted Report, 2016). An awareness of regular absences among female peers, along
with recurring incidents of leakages on classroom chairs, galvanised a group of female
students to take action. This took the form of creating locker space next to the girls’ toilets to house donated period products and to facilitate universal access to any student who found themselves in need of them.

In a discussion with these students about how they felt talking about their periods, the topic of awkwardness and embarrassment arose:

Rosie: ‘I mean we’ve kind of been brought up with the idea that we shouldn’t talk about it, like not from family but…’

Cassie (interjects): ‘It’s not socially acceptable to talk about it.’

Rosie: ‘Yeah, so if we mention it in groups that say, aren’t our friends, they don’t understand and are like “ugh, why are you talking about that?”’ (Student Focus Group)

It is clear from this exchange that ‘menstrual etiquette’ (Laws, 1990) has been instilled through dominant cultural discourses and social norms surrounding menstruation which compel women and girls to stay silent about this particular feature of their bodies. In organising a special assembly which was filmed and posted on the academy’s website, the girls hoped to address feelings of embarrassment through bringing the topic out into the open. The reactions from some parents to the film were communicated by the Vice Principal:

’If you look at the video the girls did and look at the comments […] there were some lovely comments! (with sarcasm). There was: “Oh, is nothing sacred?”; “Why are we talking about this?” and “This is disgusting!” And this from women!’ (Academy Staff Focus Group)

Feelings of discomfort at menstruation being spoken of publicly are implicit in these comments, conveying the persistence of menstrual taboos and the practice of menstrual etiquette (Laws, 1990). As Bobel (2010) explains, in addition to etiquette expressing and underscoring status distinctions, it is also enforced through social sanctions such as adverse comments as those shown above.

In her analysis of female body experiences, Young (2005) contends that a woman’s body is ‘enculturated’ from childhood by what is culturally expected or required of them. A woman therefore experiences herself within a context of interactions and discourse that positions her in systems of evaluation and expectations that she herself has not chosen. In seeing herself as looked at in a particular way and ‘described in her physical being in certain ways, she experiences the bodily reactions of others to her, and she reacts to them’ (Young, 2005: 7). Negative words such as ‘horrible’; ‘not nice’; and ‘embarrassed/embarrassing’ re-occurred across all focus group and interview transcripts in reference to periods. However, the same cultural discourses not only shape the way in which periods are managed, they are also responsible for feelings of shame and humiliation among those struggling to afford period products. The following section focuses on the ways in which ‘period poverty’ disrupts and restricts women’s and girls’ lives and demonstrating how the anxiety of having one’s period exposed publicly can sometimes overwhelm women and girls who lack money to buy menstrual products.
Disruption, concealment and curtailment

When money is scarce, the capacity for keeping menstrual blood hidden from public scrutiny is severely compromised. The increased risk of social disclosure thus amplifies the worry, anxiety and embarrassment women and girls generally feel when menstruating. Embarrassment was spoken about in relation to not having enough money to buy period products; in relation to having to ask others for products or to borrow money, and last, in relation to ‘leaking’ in public. Lacking the funds to buy menstrual products undoubtedly constituted a ‘situational constraint’ for Kim, that not only necessitated ‘makeshifting’ practices (Patterson and Hale, 1985) it also amplified feelings of self-consciousness and a sense of others’ judgement (Tangney et al, 2005): “It’s horrible, it’s degrading. Nobody should have to be like that” (Kim, Interviewee).

At the academy, embarrassment was acknowledged as an emotional impact for girls having to ask staff for pads and in the focus group with students, it was clear that the elimination of embarrassment was key in devising their system of sanitary wear provision:

Chloe: ‘That’s why I said to put ’em inside the actual toilets, to just get like a small basket and just fill ’em up like, say at the end of the day, or at the end of the week. Then they’ve got the facilities inside of the toilets so they don’t feel embarrassed in front of people.’ (Student Focus Group)

An awareness of the family’s financial circumstances can lead to the careful management and adjustment of young people’s needs, resulting in self-denial, as documented by Ridge (2006). Among staff at the academy there was consensus that rather than put further burden on their parents with requests for period products, girls were turning to their friends for help, eliciting this response from the Vice Principal:

‘They’re asking friends to bring them in for them. If you ask the girls, that’s what they’ll say, that they do bring sanitary products in for their friends as well, which is also very demeaning isn’t it? Having to ask your friend to bring in sanitary products for you?’ (Academy Staff Focus Group)

This is indicative of the ways in which poverty shapes social relationships for young people, causing anxiety and unhappiness, and provides new dimensions to Ridge’s (2011) research examining the everyday costs of poverty in childhood. It also elucidates research by Plan International UK (2018) who highlighted the detrimental impact of ‘period poverty’ on girls’ lives, resulting from a combination of prevailing taboos surrounding periods and the shame connected with poverty.

Thus far, this discussion has shown how dominant cultural discourses surrounding menstruation influence the ways in which women and girls experience their periods, comprising a micro-management of performance within a framework of etiquette. Such an etiquette ‘creates an emotional and disciplinary burden for girls and women’ (Young, 2005), and is enforced through social sanctions such as mockery and adverse comments. As argued by Bobel (2010) women are discredited by any behaviour which draws attention to their period and therefore invest a substantial amount of time and energy in ensuring that it is concealed. The ability to do this is severely hindered when women lack the money to buy the products that are necessary to prevent their bleeding being obvious. Fear of social disclosure and stigmatisation
causes embarrassment and shame and is what prompts women and girls to self-exclude themselves from normal activities in the public sphere. The next section demonstrates how prevailing inequalities of gender and class are both reinforced and reproduced in the context of ‘period poverty’.

*Embarrassment, shame and stigma*

To ensure they have menstrual products the women and girls involved in this research typically resorted to asking family and friends for them, or for loans of money in order to purchase them, thus amplifying feelings of embarrassment and shame:

> ‘When you’re at Uni and you don’t have a lot of money, and I mean it’s a monthly expense, it does cost a fair amount […] I couldn’t afford it. The first year of Uni I was pretty much asking my two female flatmates pretty much every month […] their families were a lot more well off, they were getting money as extra, so if they were buying a 24 pack for themselves, they’d buy one for me […] I was lucky, but it was shaming.’ (Anna, Interviewee)

In their study examining the ways in which adolescent girls in Kenya were being affected by menstrual deprivations caused by poverty, Crichton et al (2012) identified embarrassment, low mood, anxiety and fear of stigma as important consequences. For the participants involved in this study, this resulted in self-exclusion from social participation, causing significant disruption in their daily lives and curtailing normal activities. For Nikki, periods have always constituted changes in her behaviour, restricting activities and sometimes confining her to home. During the times in her life when she did not have enough money for period products, staying at home was deemed safer because: “I knew that if I was at home and I leaked through, I could go and change, have a bath or whatever else” (Nikki, Interviewee).

The ability to have access to the bathroom and clean oneself when menstruating is important to women to ensure that they do not ‘smell’, illustrating their embodiment of cultural discourses that espouse women’s cleanliness and freshness (Martin, 1989; Laws, 1990; Chrisler, 2011). Hence, bathing and showering become increasingly important when the capacity to afford sanitary wear is reduced. Anna, a full-time student, spoke of how an inability to afford products has sometimes resulted in locking herself away in her room: “You know, some months I’d pluck up the courage and ask friends, some months I just wouldn’t and I’d lock myself away and I’d just sit in my room and you know [pauses] showering myself, I’d just shower myself 4/5 times a day” (Anna, Interviewee).

Proprieties of concealment were also ubiquitous among migrant women’s experiences of menstruation in Hawkey et al’s (2016) study, with frequent visits to the bathroom reported. One of the emotional and psychological impacts arising from prolonged spells of home confinement is low-mood, as experienced by Kim who talked of how staying at home while menstruating was easier because it afforded her the opportunity of getting changed and bathing: “Yeah, it does affect you mentally. I think when it’s affecting your everyday life and you can’t do what you want, it does bring you down” (Kim, Interviewee).
In this quote Kim articulates the consequences for mental health of ‘period poverty’. Maintaining normal, everyday routines is problematic, and for those in full-time education, the ability to attend lectures at university is compromised: “I know I’ve missed a good amount of classes, a good amount of classes just because I couldn’t afford to do a lot” (Anna, Interviewee).

Anna talked about how ‘period poverty’ for her, means not only being unable to afford pads or tampons, it is also about being able to buy other essentials such as pain relief for debilitating cramps. This also affected her ability to socialise.

The Community Public Health Nursing Team also spoke of high numbers of non-attendance among teenage girls across the city, although they could not be certain of the cause because of a reluctance among girls to discuss their periods. The Department for Education’s recent investigation (2018) to ascertain whether girls were indeed missing school because of an inability to afford period products, has been criticised for failing to clarify the effect on girls’ education as it only looked at absence data. For the Vice Principal at the academy, the impact on a girl’s education was harmful, with potentially far-reaching consequences: “Because the minute they’ve missed a couple of lessons, they go back in, they don’t know what they’re doing, and then the behaviour kicks in [...] then they get excluded and it can turn into a massive vicious circle [pauses] with our most vulnerables really” (Academy Staff Focus Group).

There is justifiable concern and debate (Williams, 2018) that the issue of ‘period poverty’ denies girls from low income families some of their human rights under the United Nations Convention on the Rights of the Child (UNCRC). Concern for those girls already socio-economically disadvantaged and considered vulnerable was echoed by the health professionals: “It’s this cycle isn’t it? Because they will then become low earners or non-earners, won’t they? [pauses] And it is that cycle, the cycle of deprivation really” (Community Nurse Focus Group).

In this evaluation, a lack of menstrual products further acts as an impediment to girls’ participation in sports activities, a vital component of the government’s childhood obesity plan (Department of Health and Social Care, 2017). From a health professional’s perspective then, public health policies are being undermined, and ‘period poverty’ is viewed as contributing to wider health inequalities.

As discussed here, ‘period poverty’ has been shown to constrain the lives of women and girls from lower socio-economic positions, through significantly limiting social participation and disrupting school attendance. Education and the empowerment of women are inherently linked and it has been demonstrated by Marmot (2015) that a more educated woman who has access to information, can get access to contraception and is therefore more likely to be economically active. If the lives of girls and women who are already socially disadvantaged, are further inhibited by a lack of access to period products thereby consigning them to home and the private sphere, their involvement in the public sphere is accordingly diminished. This then, serves to perpetuate and consolidate gender inequality.

**Conclusion**

This study examined the nature of ‘period poverty’ as it is experienced by women and girls in Stoke-on-Trent with the aim of elucidating the ways in which daily lives are being affected. In doing so, it also addresses the current lack of empirical data relating to this issue. In addition to the cost of period products and a lack of money...
to afford them acting as a significant barrier to access, substantiating evidence from Plan International UK (Tingle and Vora, 2018), the prevalence of ‘menstrual etiquette’ (Laws, 1990) further impedes women from talking about their predicament and asking for help. This complex set of rules not only determines how women experience and manage menstruation, enmeshing them in social practices that sustain unequal systems of power, it would seem to also ensure that experiences of ‘period poverty’ remain hidden.

This research also found that when women lack the money to buy period products, their menstrual care practices are severely undermined, causing undue anxiety arising from increased risk of social disclosure and resulting stigmatisation. The fear of menstrual bleeding becoming publicly visible often proved overwhelming for the women interviewed within this study. To avert being outed as menstruating, interviewees spoke of home-confinement, which occasioned low-mood and turning to family and friends for help and support, which augmented negative emotions such as embarrassment and shame. This supplements Crichton et al’s (2012) study documenting experiences of menstrual deprivation in Kenya.

For girls who are in full-time education a reluctance to place further strain on limited household budgets instigated careful management of their personal needs. These findings develop the extant literature on the ways in which poverty shapes social relationships for young people (Ridge, 2006; 2011; Naven et al, 2019) by revealing how a consciousness of family finances can prompt self-denial and self-exclusion, inducing unhappiness and anxiety.

One of the intentions of this research was to determine the impact of ‘period poverty’ on girls’ education as this was missing from Crichton et al’s study (2012), and from the Department of Education’s (2018) investigation into the links between absenteeism among socially disadvantaged girls and ‘period poverty’. Significantly, non-attendance at school coinciding with menstruation had been noticed among girls from low-income households by staff at the academy. In the Vice Principal’s view, issues relating to ‘period poverty’ cause disruption to those students’ education who are already socio-economically disadvantaged. Through initiating cycles of absenteeism, educational outcomes for the most vulnerable students are inevitably impaired. This echoes concern (Williams, 2018) that ‘period poverty’ infringes upon the human rights of girls from low-income backgrounds under the United Nations Convention on the Rights of the Child (UNCRC).

The findings provide empirical evidence that in the context of ‘period poverty’, inequalities of gender and class are reinforced and reproduced, exemplifying stigma as a political and social function and a form of power. Since instances of ‘period poverty’ are increasing within a landscape of austerity, ‘a distinctly gendered ideology, process and condition’ (Hall, 2020: 242), a key strength of this study is its contribution to the understanding of everyday, gendered inequalities which it does through foregrounding the voices of women and girls. Further research could explore accounts of ‘period poverty’ from younger girls under the age of 16, and longitudinal research should be utilised to investigate the longer-term consequences on both health and educational outcomes.

**Note**

1 For related discussions on makeshifting, consumption and thrift see for instance, Holmes, 2018.
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Conflict of interest
The author declares that there is no conflict of interest.

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